SIC

Code

Tax Class

## **Business Tax Account**

Date



Zoning Staff Signature

## **BUSINESS LICENSE RENEWAL APPLICATION**

CITY OF ATLANTA | DEPARTMENT OF FINANCE | OFFICE OF REVENUE | BUSINESS TAX DIVISION 55 TRINITY AVENUE SW, SUITE 1350, ATLANTA, GA 30303 | PHONE (404) 330-6270 Lines 13 and 14 are REQUIRED to complete the renewal process.

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For more information, visit http://www.atlantaga.gov/index.aspx?page=1092

Please complete all sections of this form. The State of Georgia requires a notarized SAVE and E-Verify affidavit to issue a valid business license. All business licenses expire on December 31st annually. Business licenses must be renewed on or before February 15th annually. Per Ordinance 04-O-1810, failure to renew your business license by February 15th of each year will result in a \$500 late fee applied to your account. **Business Tax Account Information** Legal Name of Business/DBA 2. Business Site Address Corporate Address 3b. Mailing Address Contact Name **Business Phone** 6. Corporate Phone E-mail 7b. Secertary of State Control # 7. State of Georgia Sales Tax ID # State of Georgia Tax ID# Federal Employer Identification # Ownership Type 11b. Is this an Internet Business? □ Partnership □ Corporation □ Sole Owner □ Other (please specify): If you are changing your 12. Are there any changes? Check to indicate the appropriate change and write new information below: location, a Zoning Fee of \$50 □ Business Name ☐ Mailing Address □ Telephone Number is required. PRIOR YEAR ACTUAL GROSS REVENUE All businesses are subject to Audit by the City of Atlanta Department of Finance. If selected NUMBER OF EMPLOYEES for audit and pursuant to City Ordinance Chapter 30-85, businesses must attach a copy of their prior year tax return (IRS forms 1120, 1065, or Georgia Forms 500 through 700). 15. E-VERIFY # (4-6 DIGITS) If 11 or more employees, please provide E-Verify number Certification The information herein is required by Section 30 68 in the Code of Ordinances of the City of Atlanta. 16. Full Name , being the of the business firm named, do hereby register to operate **Describe Business Activity** said business with the dominant business activity of Pursuant to the ordinance; the undersigned certifies that he/she is the person duly authorized by the business herein named to file this registration and application for a business license, including the accompanying schedules and statements, and that the same are true. The business license does not authorize the serving of alcohol. All applicable businesses must obtain a separate alcohol license. A partnership requires both signatures. Applicant Signature Title **Applicant Signature** For Official Use Only - Zoning Review DEPARTMENT OF PLANNING AND COMMUNITY DEVELOPMENT | OFFICE OF BUILDINGS | ZONING ENFORCEMENT DIVISION 55 TRINITY AVENUE SW, SUITE 3900, ATLANTA, GA 30303 | PHONE (404) 330-6175 The Zoning Enforcement Division processes business license applications (available through the Business Tax Division) to verify if a business can exist in the desired location. Zoning conducts research to verify that there is permitted use based on the district regulations. Business licenses in the Zoning Enforcement Division are processed on the same day if you are submitting your business license application in person. Some licenses may require site inspections or further research to determine approval, which will require additional days to review. The Zoning Enforcement Division charges a \$50 processing fee. Parcel ID # Lot District **Zoning District** □ Approved □ Denied Conditions